PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09900132

CLAIMS A			S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14				ſ	RATE	FEE	· [RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			H minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			(minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ess than zero, enter		"0" in column 2		TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)	- ·	(Colu		(Column 3)	۰ .	SMALLE	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4114	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							١. ا	+135=		OR	+270=	
(1) 4 시간 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								TOTAL ADDIT. FEE		خد	TOTAL ADDIT. FEE	
4 3 0.		(Column 1)	. v. 1979 3.2	: (Colu	mn 2)	(Column 3)				•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	TATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	• .
	FINOT PRESE	NIATION OF W	OLIPLE DEP	ENDEN	CLAIN			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	*** **	(Column 1)			mn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=	J Ì	X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		<u> </u>	▍┃	X40=		OR	X80=	
L	HRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM]	.125_		İ	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appreciate box is column 1.												